

Brian Sandoval  
Governor

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Director



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John DiMuro, DO  
Chief Medical Officer

# Seclusion and Restraint Report for the Nevada Behavioral Health Commission

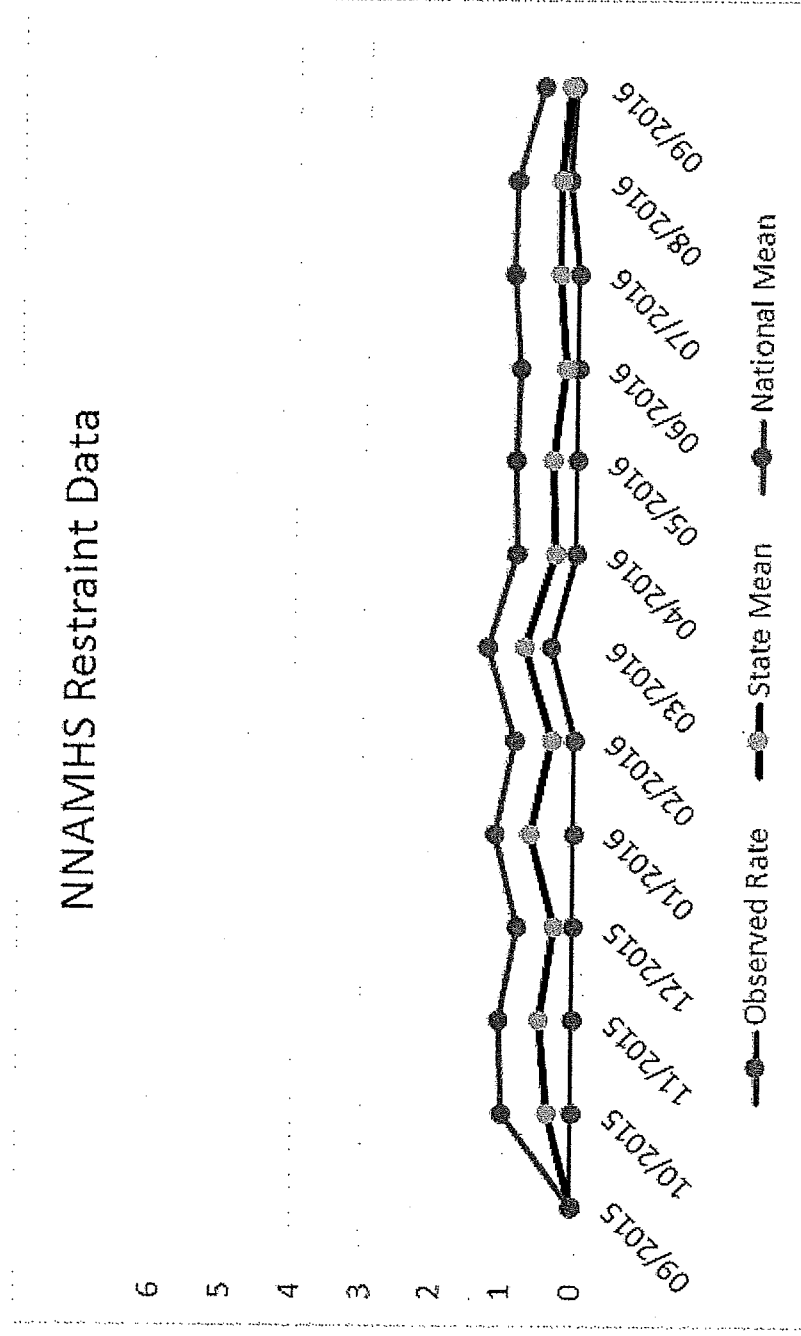
Amy Roukie, MBA  
Deputy Administrator

Department of Health and Human Services  
Division of Public and Behavioral Health  
Clinical Services

November 18, 2016



## Physical Restraint, (number of hours clients spent in physical restraint for every 1000 hours), Adults.

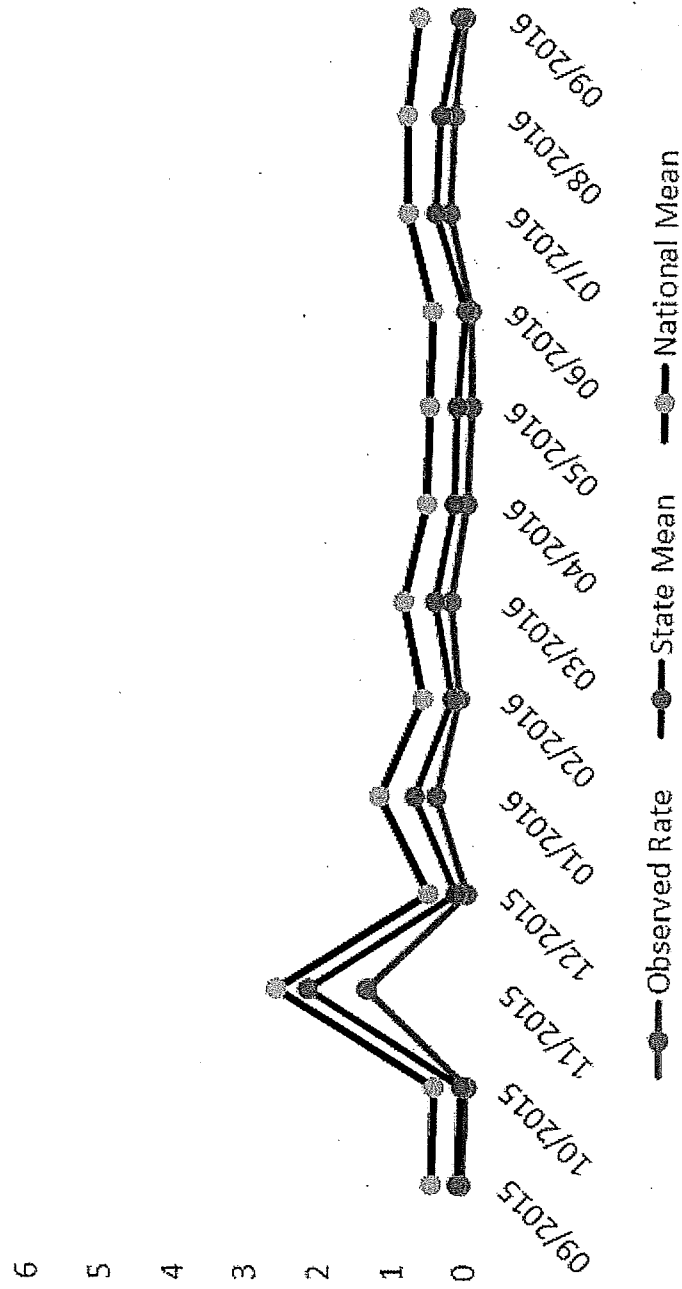


NRI-HBIPS Comparative Report (HAP & BHC) 11/3/2016



## Seclusion, (number of hours clients spent in seclusion for every 1000 hours), Adults.

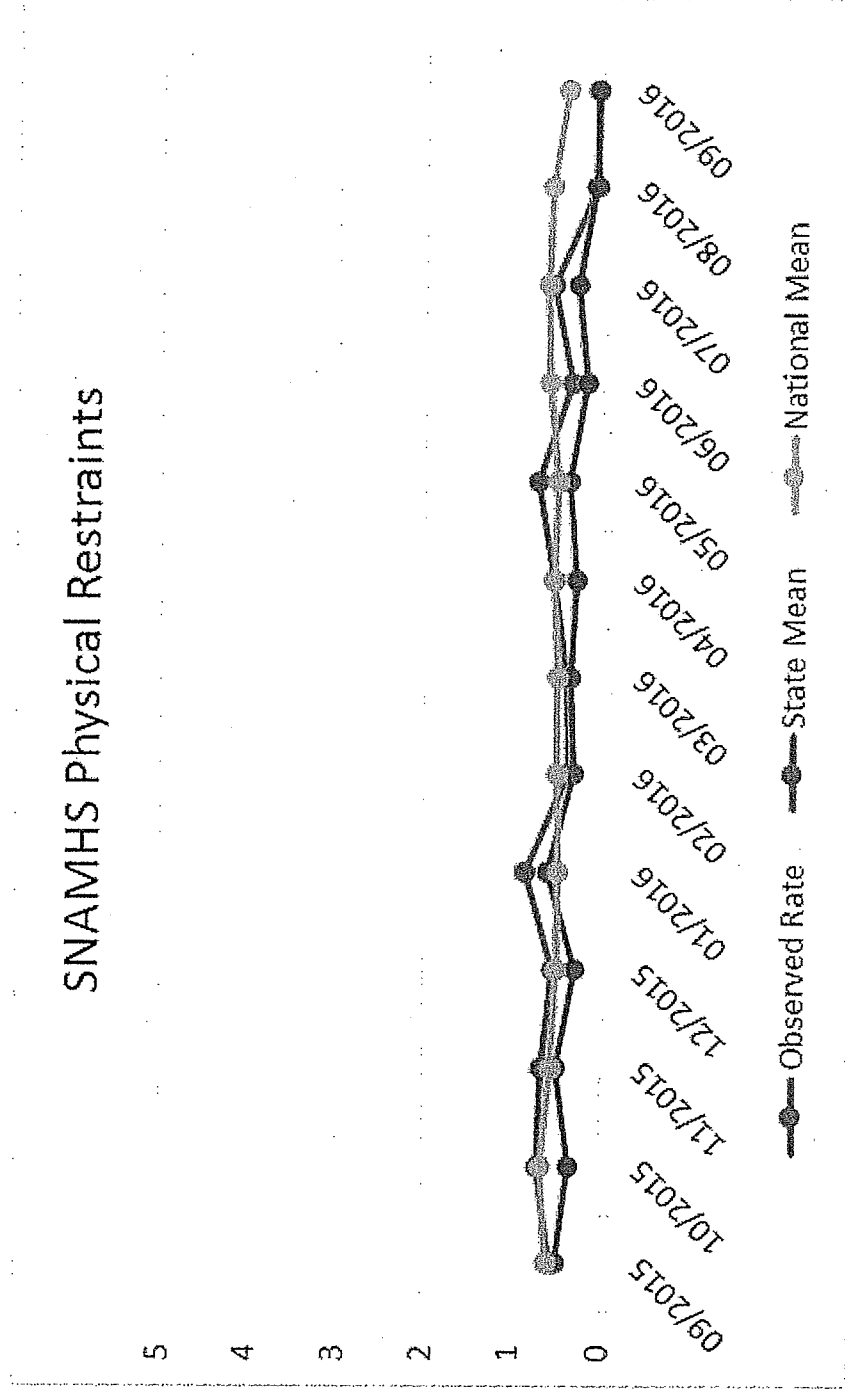
NNAMHS Seclusion Data



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## Physical Restraint, (number of hours clients spent in physical restraints, for every 1000 hours), Adults.

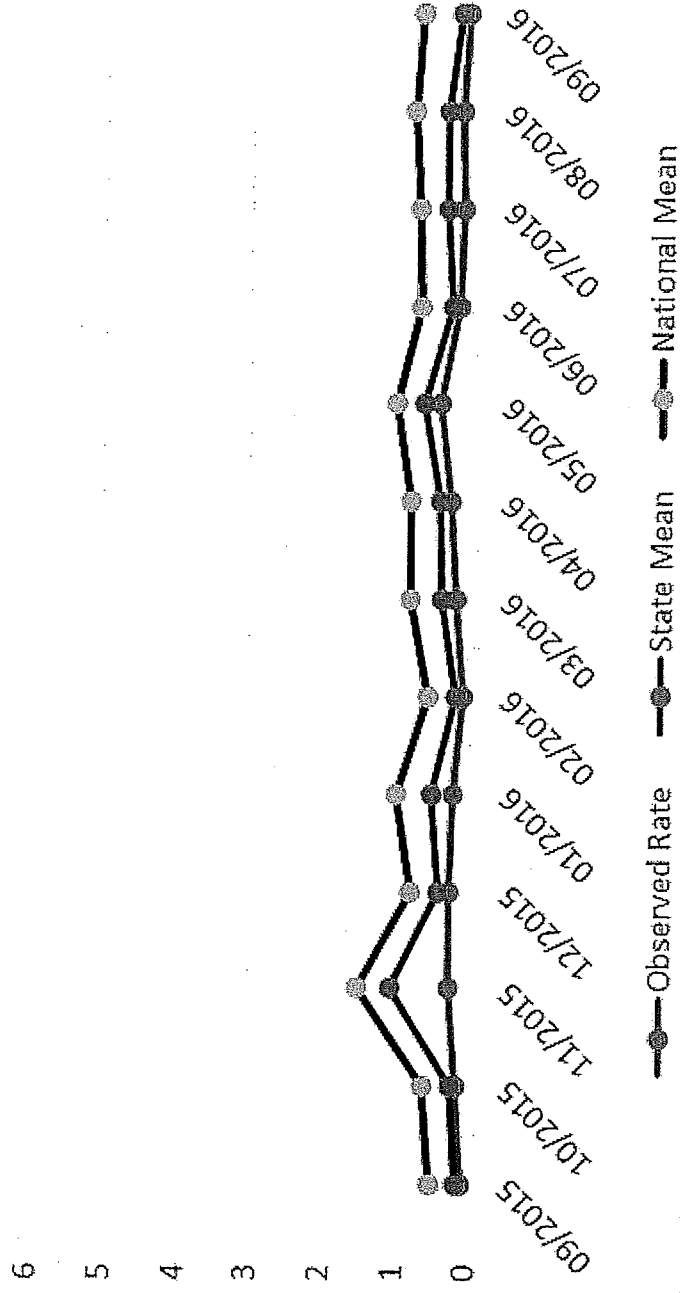


NRI-HBIPS Comparative Report (HAP & BHC) 11/3/2016



Seclusion, (number of hours clients spent in seclusion, for every 1000 hours), Adults.

SNAMHS Seclusion Data

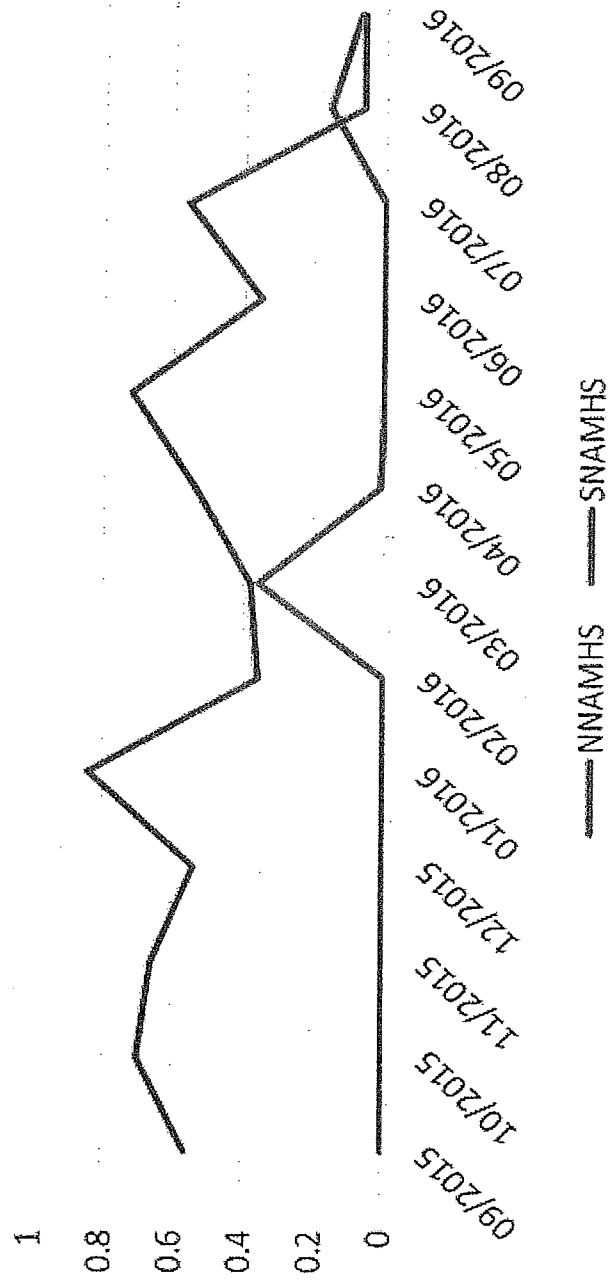


NRI-HBIPS Comparative Report (HAP & BHC) 11/3/2016



# Statewide

Overall Use of Physical Restraints  
(in number of hours clients' spent for every 1000 hours)

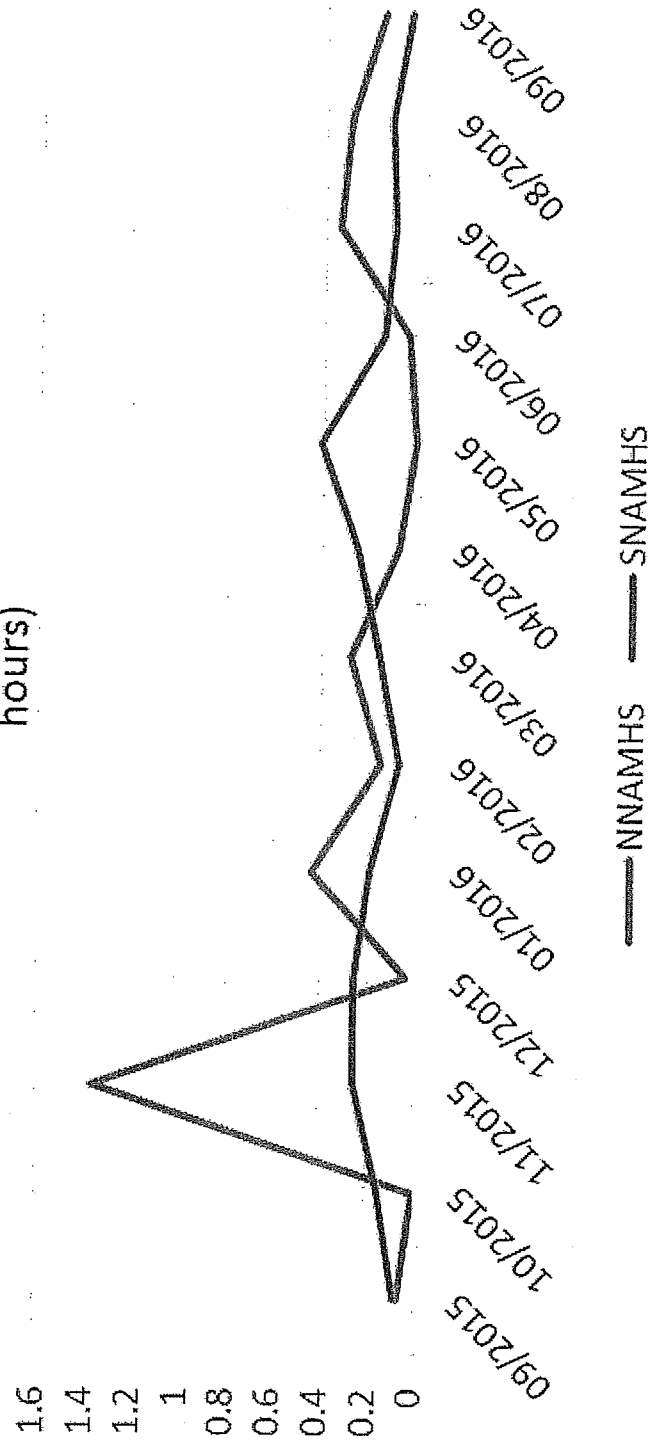


NRI-HBIPS Comparative Report (HAP & BHC) 11/3/2016



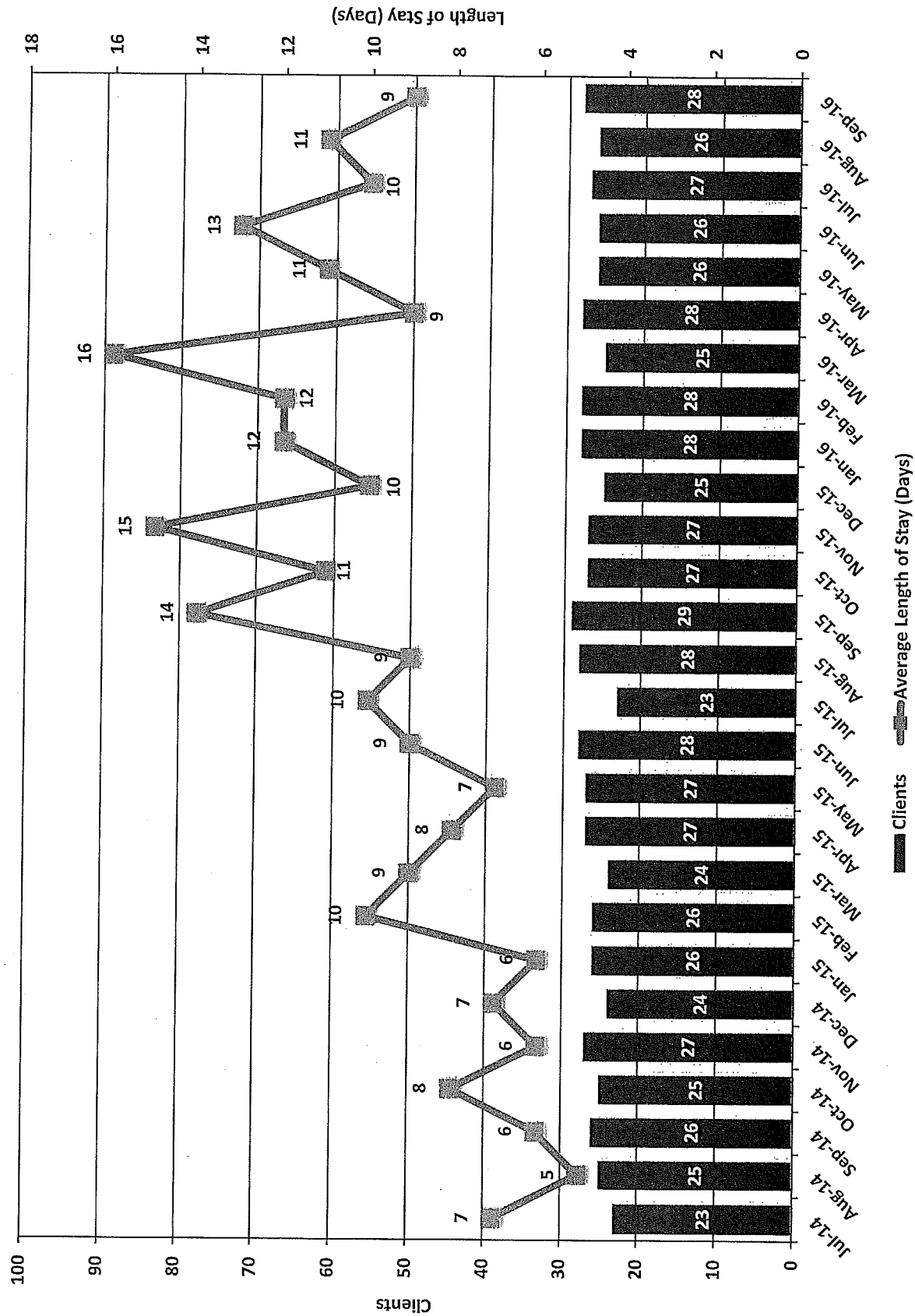
# Statewide

Overall use of Seclusion,  
(in number of hours clients spent in seclusion for every 1000  
hours)



NRI-HBIPS Comparative Report (HAP & BHC) 11/3/2016

# NNAMHS Dini-Townsend Hospital





## NNAMHS Dini-Townsend Hospital

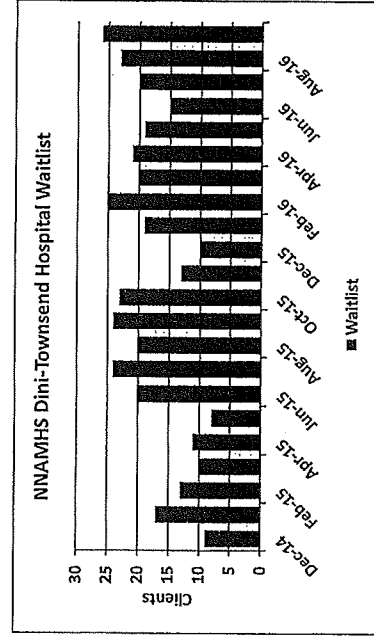
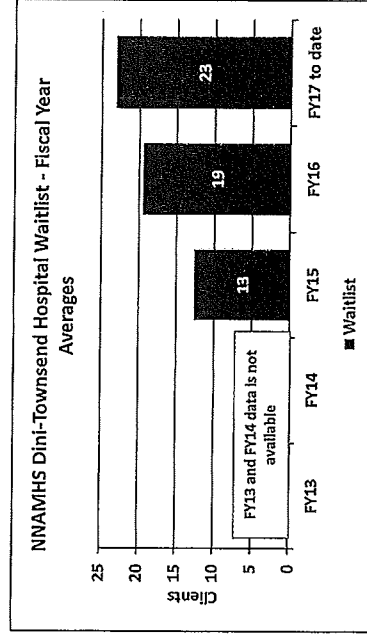
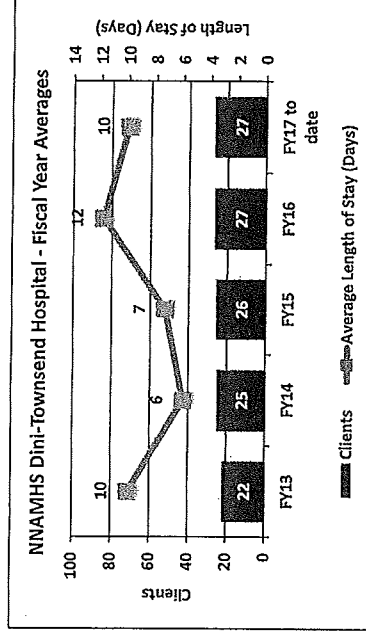
Dini-Townsend Hospital, on the campus of Northern Nevada Adult Mental Health Services, is located in Sparks, Nevada. Our mission is to provide psychiatric treatment and rehabilitation services in the least restrictive setting to support personal recovery and enhance quality of life. The hospital primarily serves those individuals that have limited access to community resources. The hospital is licensed for 50 beds but is staffed for 30 beds. We have a rapid stabilization unit of 10 beds and a unit of 20 beds for those individuals needing longer term care. Our services also include a high emphasis on discharge planning in order to assist the consumer with returning to the community as quickly as possible and within a safe environment.

	Clients	Average Length of Stay (Days)	Waitlist
Jul-15	23	10	24
Aug-15	28	9	20
Sep-15	29	14	24
Oct-15	27	11	23
Nov-15	27	15	13
Dec-15	25	10	10
Jan-16	28	12	19
Feb-16	28	12	25
Mar-16	25	16	20
Apr-16	28	9	21
May-16	26	11	19
Jun-16	26	13	15
Jul-16	27	10	20
Aug-16	26	11	23
Sep-16	28	9	26
Oct-16			
Nov-16			
Dec-16			
Jan-17			
Feb-17			
Mar-17			
Apr-17			
May-17			
Jun-17			

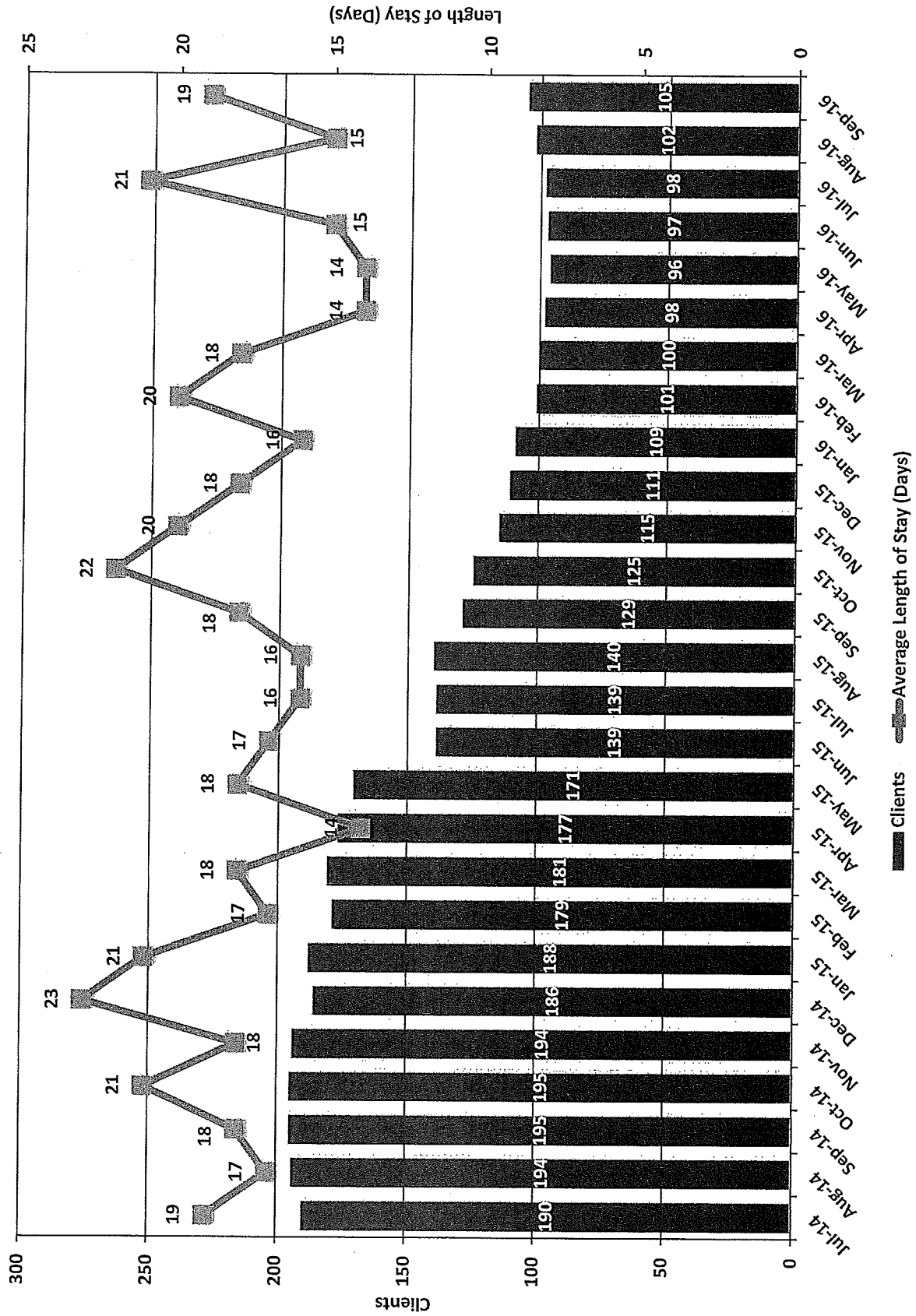
Note: Waitlist was not measured prior to December 2014.

Fiscal Year Averages

	Clients	Average Length of Stay (Days)	Waitlist
FY13	22	10	
FY14	25	6	
FY15	26	7	13
FY16	27	12	19
FY17 to date	27	10	23



# SNAMHS Rawson-Neal Hospital



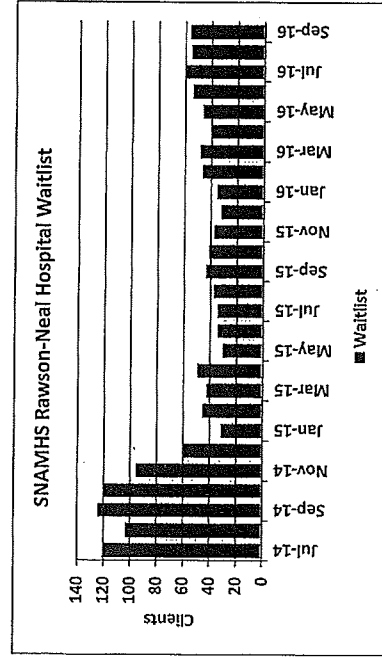
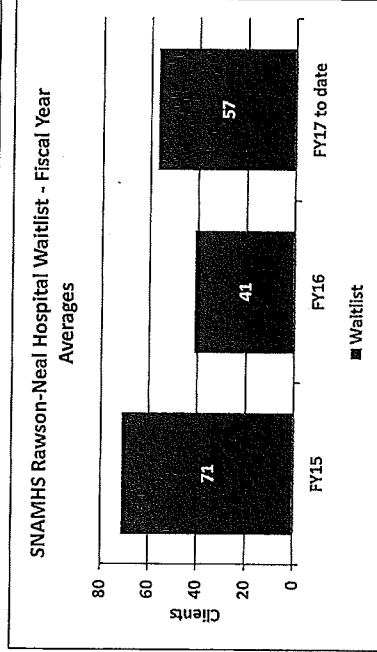
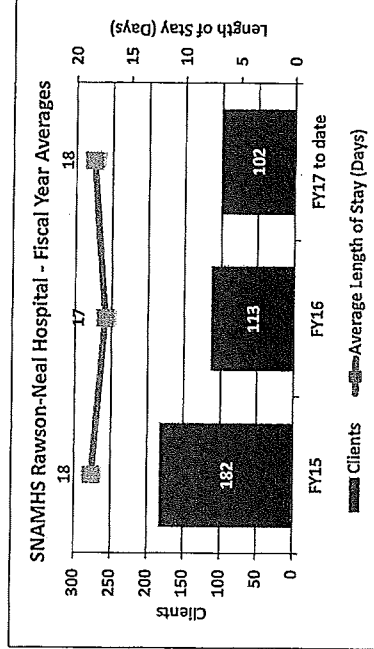
## SNAMHS Rawson-Neal Hospital

Southern Nevada Adult Mental Health Services is a licensed 274 bed facility that provides psychiatric services to individuals with mental illness. The campus houses both civil and forensic units, where behavioral assessments, evaluation and treatment are provided by psychiatrists, psychologists and other support services by our trained nursing and social services staff. SNAMHS (Rawson-Neal Hospital) civil bed capacity is 160.

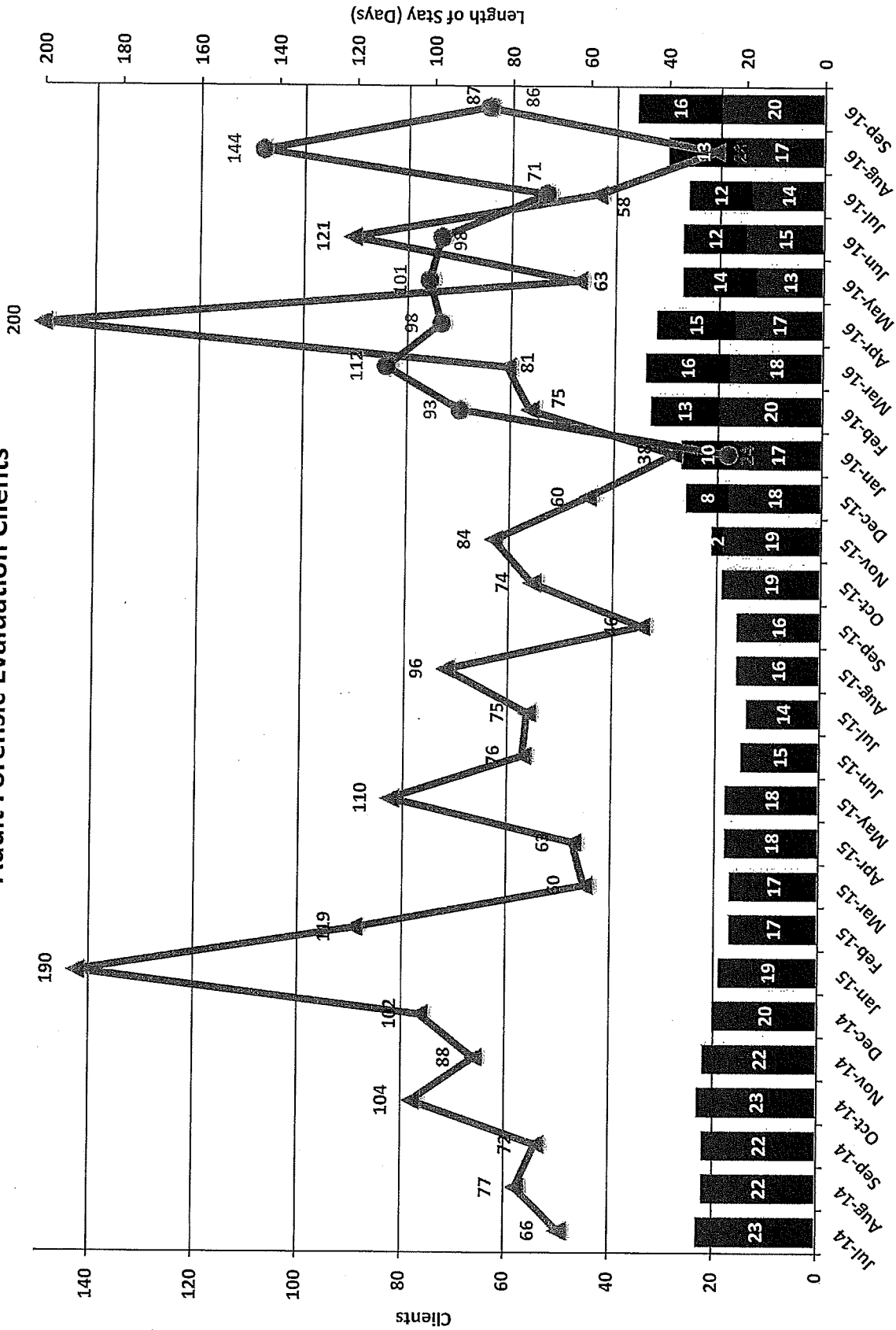
	Clients	Average Length of Stay (Days)	Waitlist
Jul-15	139	16	34
Aug-15	140	16	37
Sep-15	129	18	43
Oct-15	125	22	41
Nov-15	115	20	37
Dec-15	111	18	32
Jan-16	109	16	35
Feb-16	101	20	46
Mar-16	100	18	48
Apr-16	98	14	40
May-16	96	14	46
Jun-16	97	15	54
Jul-16	98	21	59
Aug-16	102	15	55
Sep-16	105	19	56
Oct-16			
Nov-16			
Dec-16			
Jan-17			
Feb-17			
Mar-17			
Apr-17			
May-17			
Jun-17			

Fiscal Year Averages

	Clients	Average Length of Stay (Days)	Waitlist
FY15	182	18	71
FY16	113	17	41
FY17 to date	102	18	57



# Adult Forensic Evaluation Clients



Lake's Evaluation Clients
  Stein Evaluation Clients
  Lake's Average Length of Stay (Days)
  Stein Average Length of Stay (Days)

## Adult Forensic Facilities - Evaluation Clients

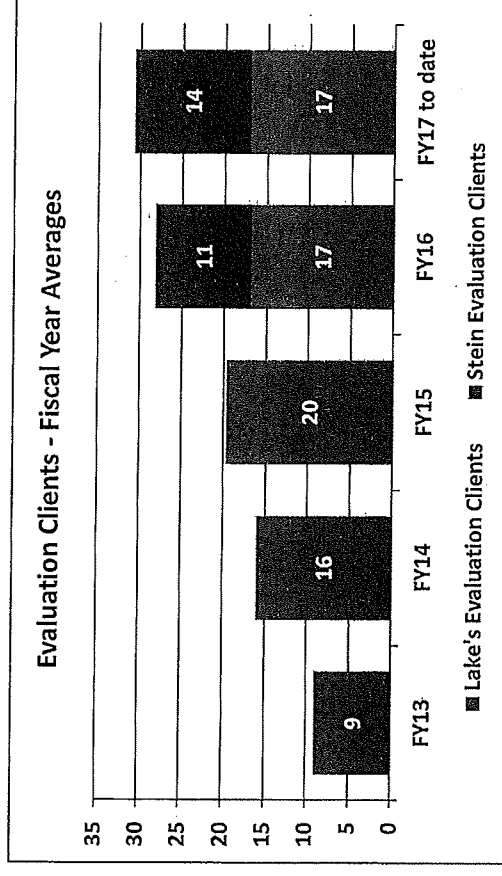
Lake's Crossing Center is a forensic behavioral health facility located in Sparks. The program provides treatment for severe mental illness and other disabling conditions that interfere with a person's ability to proceed with their adjudication or return to the community after having been found not guilty by reason of insanity/incompetent without probability of attaining competence. The facility has a bed capacity of 86. SNAMHS secure forensic units (Stein Hospital and C-Pod) provide competency evaluations to adults who are court committed. The capacity is 68.

	Lake's Evaluation Clients	Lake's Average Length of Stay (Days)	Stein Evaluation Clients	Stein Average Length of Stay (Days)
Jul-15	14	75		
Aug-15	16	96		
Sep-15	16	46		
Oct-15	19	74		
Nov-15	19	84	2	
Dec-15	18	60	8	
Jan-16	17	38	10	24
Feb-16	20	75	13	93
Mar-16	18	81	16	112
Apr-16	17	200	15	98
May-16	13	63	14	101
Jun-16	15	121	12	98
Jul-16	14	58	12	71
Aug-16	17	28	13	144
Sep-16	20	87	16	86
Oct-16				
Nov-16				
Dec-16				
Jan-17				
Feb-17				
Mar-17				
Apr-17				
May-17				
Jun-17				

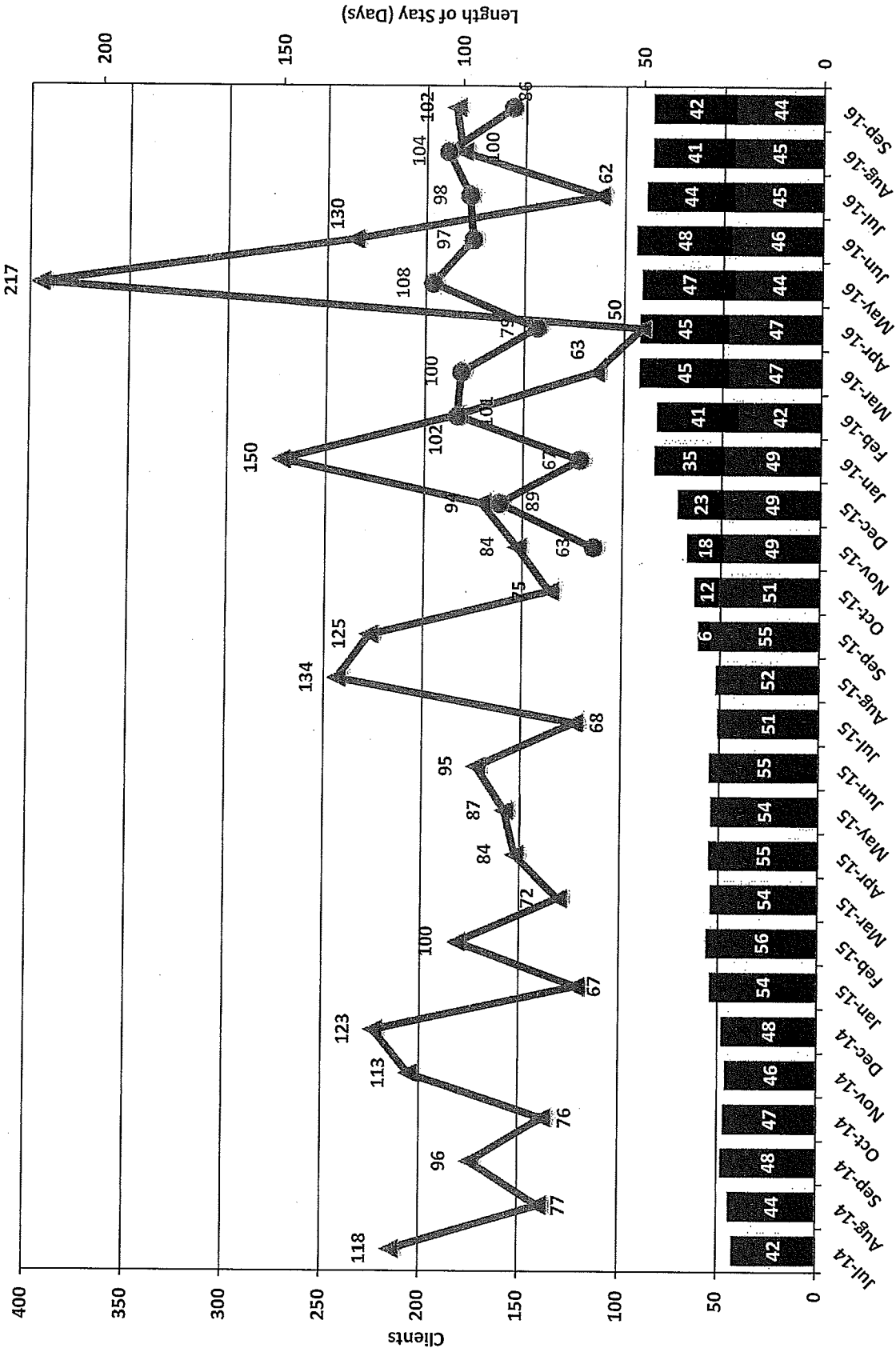
Note: Missing data will be filled in as the data becomes available.

### Fiscal Year Averages

	Lake's Evaluation Clients	Lake's Average Length of Stay (Days)	Stein Evaluation Clients	Stein Average Length of Stay (Days)
FY13	9	98		
FY14	16	61		
FY15	20	94		
FY16	17	84	11	88
FY17 to date	17	58	14	100



# Adult Forensic Restoration Clients



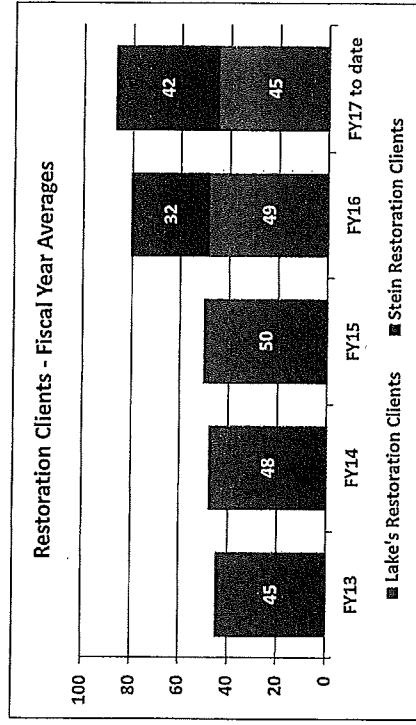
Lake's Restoration Clients
  Stein Restoration Clients
  Lake's Average Length of Stay (Days)
  Stein Average Length of Stay (Days)

## Adult Forensic Facilities - Restoration Clients

Lake's Crossing Center is a forensic behavioral health facility located in Sparks. The program provides treatment for severe mental illness and other disabling conditions that interfere with a person's ability to proceed with their adjudication or return to the community after having been found not guilty by reason of insanity/incompetent without probability of attaining competence. The facility has a bed capacity of 86. SNAMHS secure forensic units (Stein Hospital and C-Pod) provide competency evaluations to adults who are court committed. The capacity is 68.

### Fiscal Year Averages

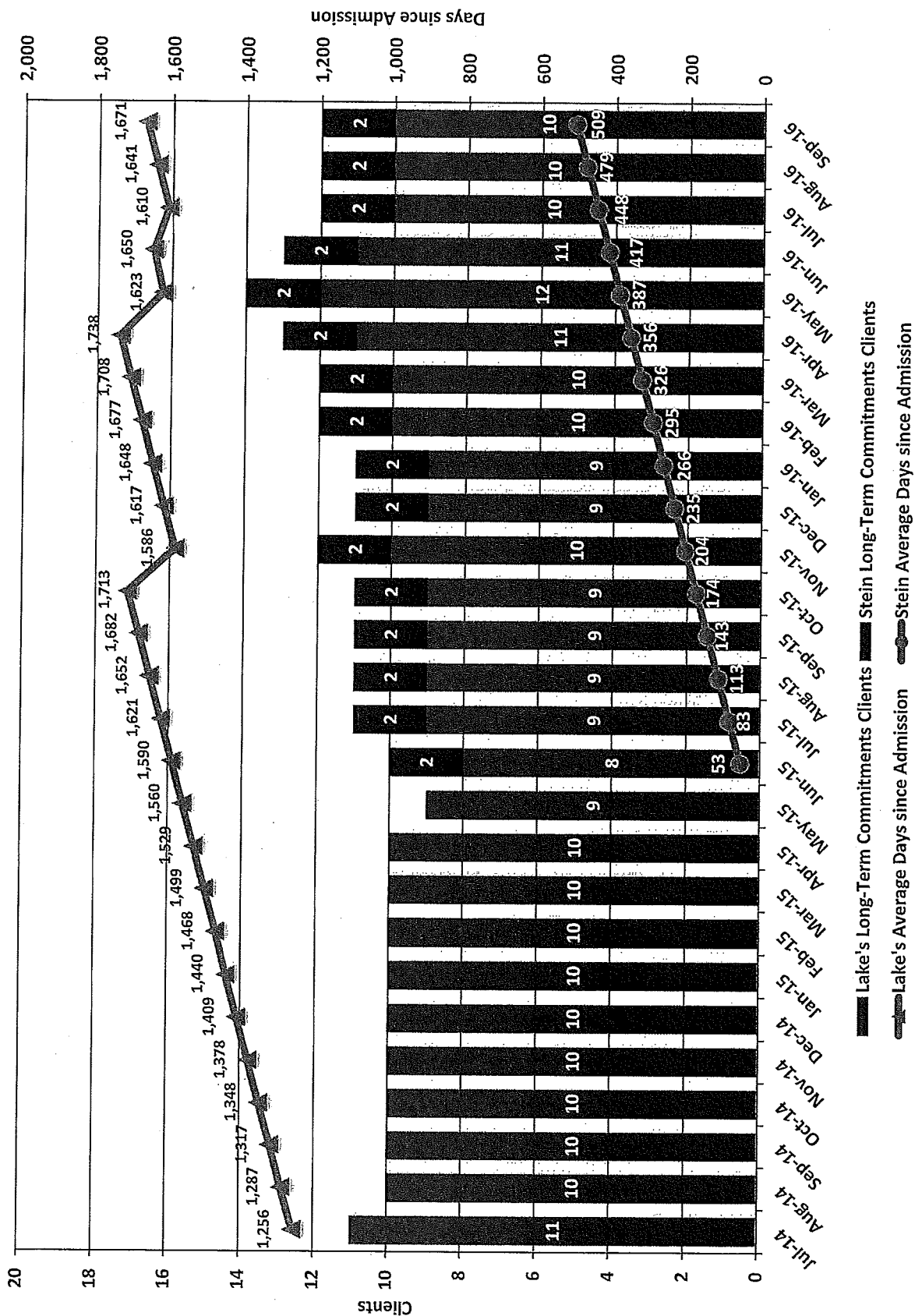
	Lake's Restoration Clients	Lake's Average Length of Stay (Days)	Stein Restoration Clients	Stein Average Length of Stay (Days)	Statewide Restoration Waitlist	Average Wait (Days)
FY13	45	81				
FY14	48	96				
FY15	50	92				
FY16	49	108	32	88	17	24
FY17 to date	45	88	42	96	16	5



	Lake's Restoration Clients	Lake's Average Length of Stay (Days)	Stein Restoration Clients	Stein Average Length of Stay (Days)	Statewide Restoration Waitlist	Statewide Average Wait (Days)
Jul-15	51	68				
Aug-15	52	134				
Sep-15	55	125	6			
Oct-15	51	75	12			
Nov-15	49	84	18	63		
Dec-15	49	94	23	89		
Jan-16	49	150	35	67		
Feb-16	42	102	41	101	35	56
Mar-16	47	63	45	100	25	52
Apr-16	47	50	45	79	12	22
May-16	44	217	47	108	6	5
Jun-16	46	130	48	97	12	4
Jul-16	45	62	44	98	15	5
Aug-16	45	100	41	104	16	6
Sep-16	44	102	42	86	17	4
Oct-16						
Nov-16						
Dec-16						
Jan-17						
Feb-17						
Mar-17						
Apr-17						
May-17						
Jun-17						

*Note: The Statewide Restoration Average Waitlist (days) is the total number of days individuals are on the waitlist and does not back out the 7 days that Lake's has to transfer them to a facility.*

# Adult Forensic Long-Term Commitments



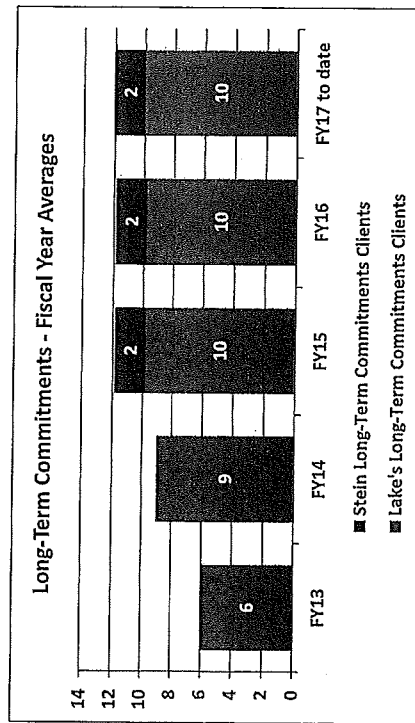


## Adult Forensic Facilities - Long-Term Commitments

Lake's Crossing Center is a forensic behavioral health facility located in Sparks. The program provides treatment for severe mental illness and other disabling conditions that interfere with a person's ability to proceed with their adjudication or return to the community after having been found not guilty by reason of insanity/incompetent without probability of attaining competence. The facility has a bed capacity of 86. SNAMHS secure forensic units (Stein Hospital and C-Pod) provide competency evaluations to adults who are court committed. The capacity is 68.

### Fiscal Year Averages

	Lake's Long-Term Commitments Clients	Lake's Average Days since Admission	Stein Long-Term Commitments Clients	Stein Average Days since Admission
FY13	6	1,260		
FY14	9	1,207		
FY15	10	1,423	2	
FY16	10	1,660	2	250
FY17 to date	10	1,641	2	479



	Lake's Long-Term Commitments Clients	Lake's Average Days since Admission	Stein Long-Term Commitments Clients	Stein Average Days since Admission
Jul-15	9	1,621	2	83
Aug-15	9	1,652	2	113
Sep-15	9	1,682	2	143
Oct-15	9	1,713	2	174
Nov-15	10	1,586	2	204
Dec-15	9	1,617	2	235
Jan-16	9	1,648	2	266
Feb-16	10	1,677	2	295
Mar-16	10	1,708	2	326
Apr-16	11	1,738	2	356
May-16	12	1,623	2	387
Jun-16	11	1,650	2	417
Jul-16	10	1,610	2	448
Aug-16	10	1,641	2	479
Sep-16	10	1,671	2	509
Oct-16				
Nov-16				
Dec-16				
Jan-17				
Feb-17				
Mar-17				
Apr-17				
May-17				
Jun-17				

*Note: These clients are committed for up to ten years.*



Thank you!



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Division of Public and Behavioral Health

*State of Nevada*  
Carson City, Nevada

# *Nevada Aging & Disability Services Division*



## **Restraint and Denial and Denial of Rights Report**

for the

## **Nevada Commission on Behavioral Health**

Submitted by

Kathleen McCloskey, M.A., C.P.M.

Statewide QA/QI Manager for Developmental Services

November 18, 2016

**Nevada Aging & Disability Services Division Developmental Services  
Restraint & Denial and Denial of Rights Report  
Friday, November 18, 2016**

**REDUCING RESTRAINT AND DENIAL OF RIGHTS**

ADSD Developmental Services utilizes values-based treatment and support when addressing the needs of individuals. Restraint and the use of other intrusive interventions are viewed as a last resort method to be used only in an emergency situation, as defined in N.R.S. 433.5466. Activities and best practices utilized to reduce restraint and promote positive alternative treatment and support interventions include the following:

- **Person Centered Thinking Training:** All ADSD staff are trained in Person Centered Thinking, which is a philosophy behind service provision that supports positive control and self-direction of people's own lives. The focus of Person Centered Thinking is the belief that all individuals are people first, shifting the focus of service delivery from deficit, challenge or "problem" based to one where the focus is on the person's capacities and how they can contribute and lead self-determined lives.
- **ADSD staff training requirements include the following orientation and annual trainings:**
  - Abuse, Neglect And Exploitation
  - Personal Rights/Responsibilities
  - Dignity, Respect and Due Process
  - Positive Behavior Supports
  - Person Centered Planning, Plan Implementation and Reporting on Progress
  - Ethics, Boundaries and Professional Behavior
- **Positive Behavior Supports (PBS):** PBS is an evidence-based practice that emphasizes support of desirable and prosocial behavior. The goals of PBS are to prevent challenging behavior by encouraging positive behavior, increase independence, promote positive environments and enhance quality of life. PBS combines the science of Applied Behavior Analysis with philosophy of Person Centered Planning. All individuals who engage in challenging behavior, have restrictive interventions, or who are prescribed psychotropic medications to affect behavior, are required to have a positive behavior support plan that instruct staff in how to promote prosocial behavior, reduce problem behavior and when and how to safely and positively intervene if the person engages in dangerous behavior.
- **ADSD prohibits the use of aversive interventions and seclusion.**
- **Crisis Prevention/Intervention Certification:** Physical and mechanical restraint may only be utilized by staff certified in a crisis prevention/intervention program approved by ADSD Developmental Services. An approved crisis prevention/intervention program requires national recognition and evidence of annual review and update of the curriculum based on the best legal/behavioral/ethical practices of standards of care. Two examples of approved programs are:
  - **Safety-Care:** Safety-Care Behavioral Safety Program developed by QBS, Inc. is an evidenced based curriculum that incorporates technology from Applied Behavioral Analysis (ABA) and Positive Behavior Interventions and Supports (PBIS). Safety-Care's core values and principles include respectful, human, non-coercive interventions with an emphasis on prevention over management of behavior. Safety Care is the curriculum

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used by the Desert Regional Center ICF/ID, as well as several community based service providers serving individuals with significant behavior challenges.

- MANDT: The MANDT system is a curriculum that emphasizes relationships in human service settings in order to facilitate the development of an organizational culture that provides the emotional, psychological and physical safety needed in order to teach new behavior to replace behavior that is labeled challenging.
- Behavior Intervention Committee (BIC): Each Regional Center is required to have a BIC that monitors the services provided to individuals who have had restraint in the past, have psychotropic medications to manage behavior, or who are deemed at high risk for restraints or restrictions in their lives. All crisis plans or behavior support plans that include restrictive interventions must be reviewed and approved by the Regional Center's BIC. The BICs, in addition to providing ongoing monitoring, provide technical assistance such as positive behavior support and program review/approval to help understand and address the root causes of the perceived need for restraint or other restrictive procedures, such as the use of psychotropic medications, increased supervision/protective oversight, etc.
- Regular contact with service recipients: Regional center service coordinators conduct monthly contacts, face to face quarterly contacts and annual person centered planning meetings. Each of these activities offers the opportunity to discuss the services received by the individual and the methods by which the services are given, including the use of any restrictive interventions. In addition, service coordinators conduct work site and home visits to observe the work and living environments of the individual and to observe the services being delivered.
- Environmental Reviews & Provider Certification: ADSD DS Quality Assurance staff conducts work site and home visits of service recipients to complete environmental QA reviews. During these reviews, the environment is reviewed for restrictions such as freedom of movement, privacy and free access to spending money. Provider staff is interviewed regarding their implementation of person centered plans and the use of any restrictive interventions. Use of restrictive interventions is also reviewed the provider certification process by ADSD Quality Assurance Staff. ADSD Quality Assurance staff assesses the provider's competency in providing behavioral supports to individuals. Providers who are deficient with behavioral support standards are issued a plan of correction and are monitored by the ADSD Quality Assurance staff. Unauthorized use of restrictive interventions can result in provider certification sanctions up to and including provider termination.
- National Core Indicators (NCI): NCI is a collaborative effort between the National Association of State Directors of Developmental Disabilities Services (NASDDDS) and the Human Services Research Institute (HSRI). The purpose of the program, which began in 1997, is to support NASDDDS member agencies to gather a standard set of performance and outcome measures that can be used to track their own performance over time, to compare results across states, and to establish national benchmarks. The core indicators are standard measures used across states to assess the outcomes of services provided to individuals and families. Indicators address key areas of concern including employment, rights, service planning, community inclusion, choice and health and safety.

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**DEFINITIONS OF RESTRAINT AND DENIAL OF RIGHTS**

**NEVADA REVISED STATUTES**

*“Aversive intervention”* means any of the following actions if the action is used to punish a person with a disability or to eliminate, reduce or discourage maladaptive behavior of a person with a disability:

1. The use of noxious odors and tastes;
2. The use of water and other mists or sprays;
3. The use of blasts of air;
4. The use of corporal punishment;
5. The use of verbal and mental abuse;
6. The use of electric shock;
7. Requiring a person to perform exercise under forced conditions if the:
  - a. Person is required to perform the exercise because the person exhibited a behavior that is related to his or her disability;
  - b. Exercise is harmful to the health of the person because of his or her disability; or
  - c. Nature of the person’s disability prevents the person from engaging in the exercise;
8. Any intervention technique or procedure that deprives a person of the use of one or more of his or her senses, regardless of the length of the deprivation, including, without limitation, the use of sensory screens; or
9. The deprivation of necessities needed to sustain the health of a person, regardless of the length of the deprivation, including, without limitation, the denial or unreasonable delay in the provision of:
  - a. Food or liquid at a time when it is customarily served; or
  - b. Medication (NRS 433.54.53).

*“Chemical restraint”* means the administration of drugs for the specific and exclusive purpose of controlling an acute or episodic aggressive behavior when alternative intervention techniques have failed to limit or control the behavior. The term does not include the administration of drugs on a regular basis, as prescribed by a physician, to treat the symptoms of mental, physical, mental or behavioral disorders and for assisting a person in gaining self-control over his or her impulses (NRS 433.5456).

*“Emergency”* means a situation in which immediate intervention is necessary to protect the physical safety of a person or others from an immediate threat of physical injury or to protect against an immediate threat of severe property damage (NRS 433.5466).

*“Mechanical restraint”* means the use of devices, including, without limitation, mittens, straps, restraint chairs, handcuffs, belly chains and four-point restraints to limit a person’s movement or hold a person immobile (NRS 433.547).

*“Physical restraint”* means the use of physical contact to limit a person’s movement or hold a person immobile (NRS 433.5476).

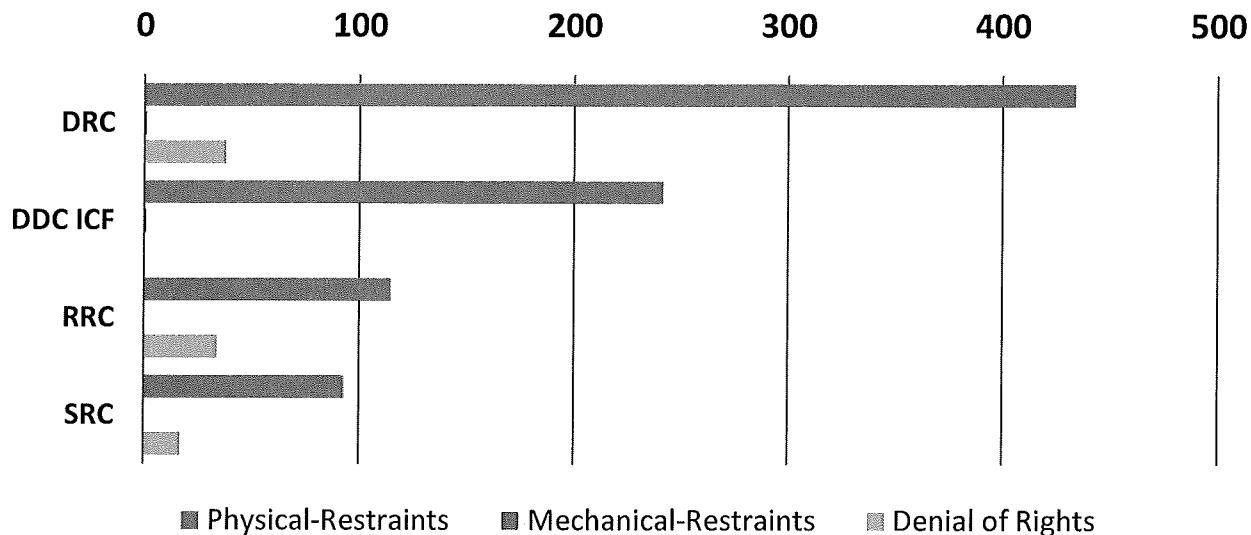
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 Restraint & Denial and Denial of Rights Report  
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**Table 1 & 2: All Developmental Services**

**July 1, 2015 to June 30, 2016**

	Physical-Restraints	Mechanical-Restraints	Denial of Rights
<b>DRC</b>	359	1	38
<b>ICF</b>	161	1	0
<b>RRC</b>	115	0	34
<b>SRC</b>	93	0	17
<b>TOTAL</b>	<b>728</b>	<b>2</b>	<b>89</b>

These facilities are of varying size and function. Comparisons between facilities should be made with extreme caution. For example, DRC is the only developmental services agency with an Intermediate Care Facility (ICF).

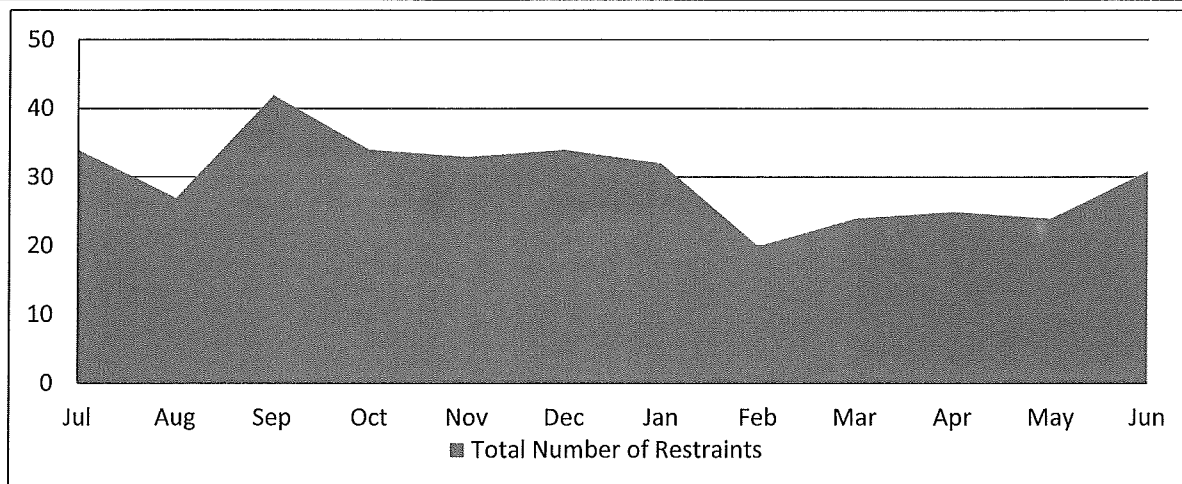


<b>Developmental Services – Breakdown of Restraints</b>							
	Physical-Escort	Physical-Prone	Physical-Other	Physical-Supine	Mechanical-Helmet	Mechanical-Protective/Special Clothing	TOTAL
<b>DRC</b>	23	11	325	0	0	1	<b>360</b>
<b>ICF</b>	3	9	146	3	1	0	<b>162</b>
<b>RRC</b>	3	0	112	0	0	0	<b>115</b>
<b>SRC</b>	1	0	92	0	0	0	<b>93</b>
<b>TOTAL</b>	<b>30</b>	<b>20</b>	<b>675</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>730</b>

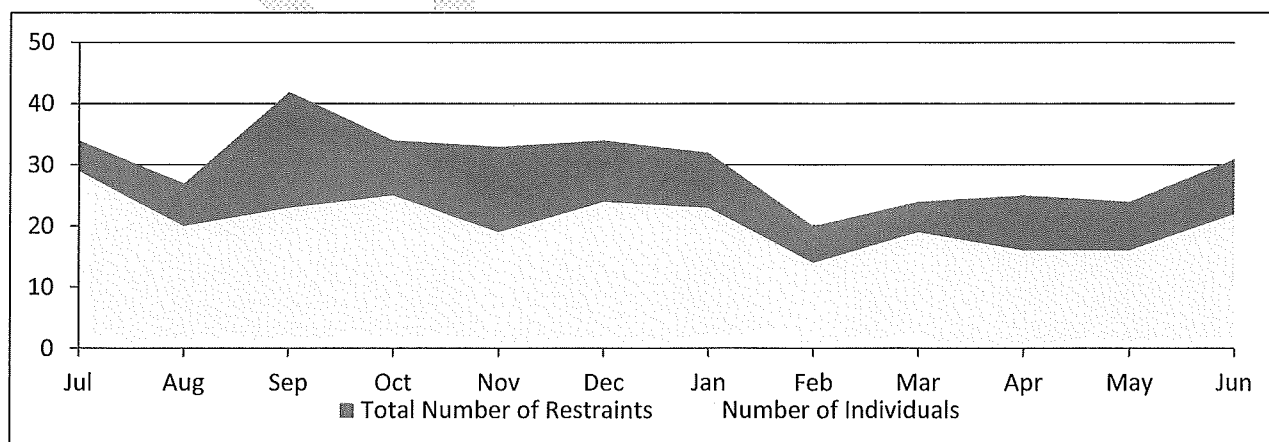
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**Table 3, 4 & 5: Desert Regional Center (DRC) Restraints & Denial of Rights**

DRC - Restraints													
Month	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total
Total Number of Restraints	34	27	42	34	33	34	32	20	24	25	24	31	360
Individuals with Multiple Events	4	4	8	6	7	7	6	4	4	7	6	5	68
≤ 2 minutes	16	20	22	16	16	11	16	14	15	21	20	18	205
2 to 10 minutes	15	4	13	13	9	21	10	4	5	3	4	8	109
≥ 10 minutes	3	3	7	5	8	2	6	2	4	1	0	5	46



DRC - Restraints													
Month	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total
Number of Individuals	29	20	23	25	19	24	23	14	19	16	16	22	250
Total Number of Restraints	34	27	42	34	33	34	32	20	24	25	24	31	360
Positive Behavioral Support Plan in Place at Time of Event	32	26	39	33	32	34	32	20	22	24	23	31	348
Debriefing/Review required by individual support team	3	0	0	0	6	4	4	0	2	2	2	0	23
Events with Individuals Injuries (Due to the Restraint)	1	1	0	1	1	2	1	1	1	2	2	0	13
Events with Staff Injuries	10	8	11	6	2	6	3	5	3	2	4	5	65

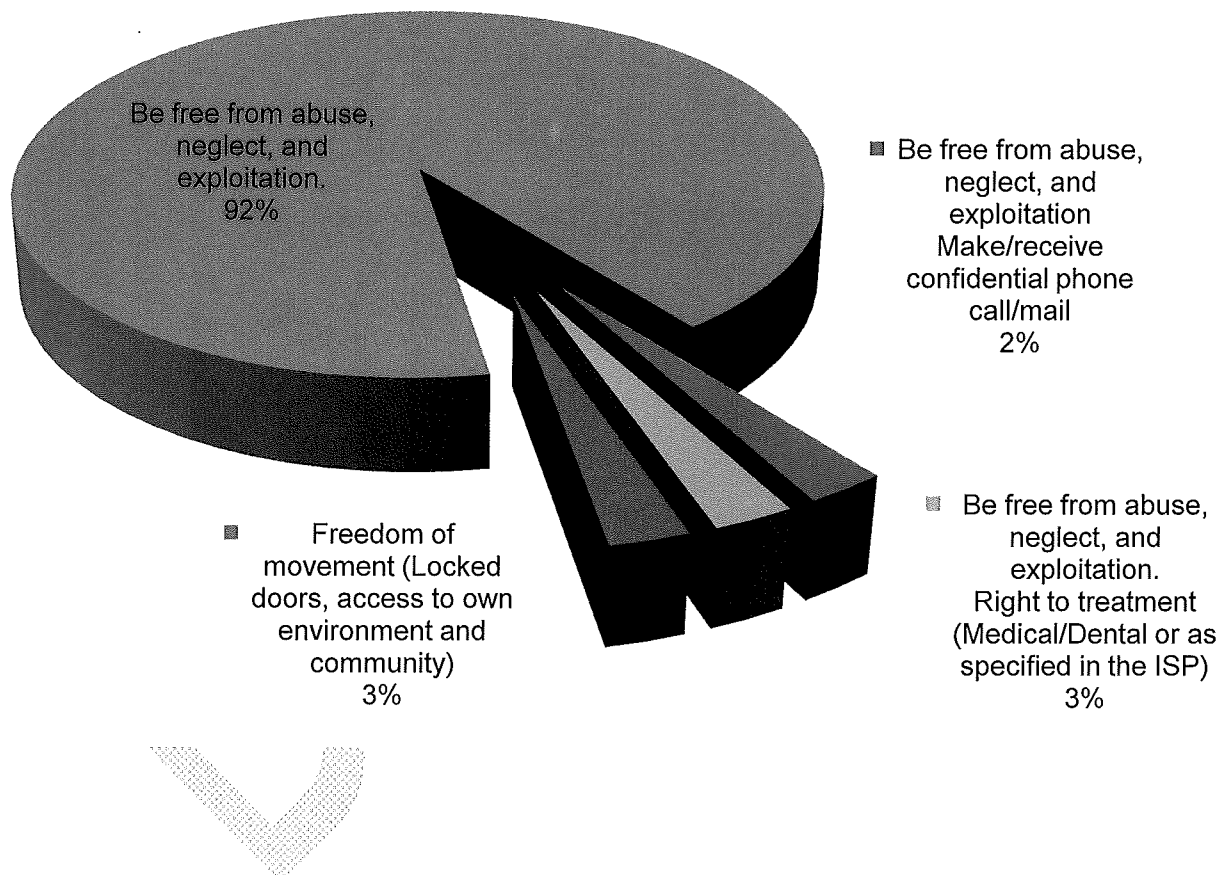




**Nevada Aging & Disability Services Division Developmental Services**  
**Restraint & Denial and Denial of Rights Report**  
**Friday, November 18, 2016**

<b>DRC - Denial of Rights</b>	
Be free from abuse, neglect, and exploitation.	<b>35</b>
Be free from abuse, neglect, and exploitation Make/receive confidential phone call/mail	<b>1</b>
Be free from abuse, neglect, and exploitation. Right to treatment (Medical/Dental or as specified in the ISP)	<b>1</b>
Freedom of movement (Locked doors, access to own environment and community)	<b>1</b>
<b>TOTAL</b>	<b>38</b>

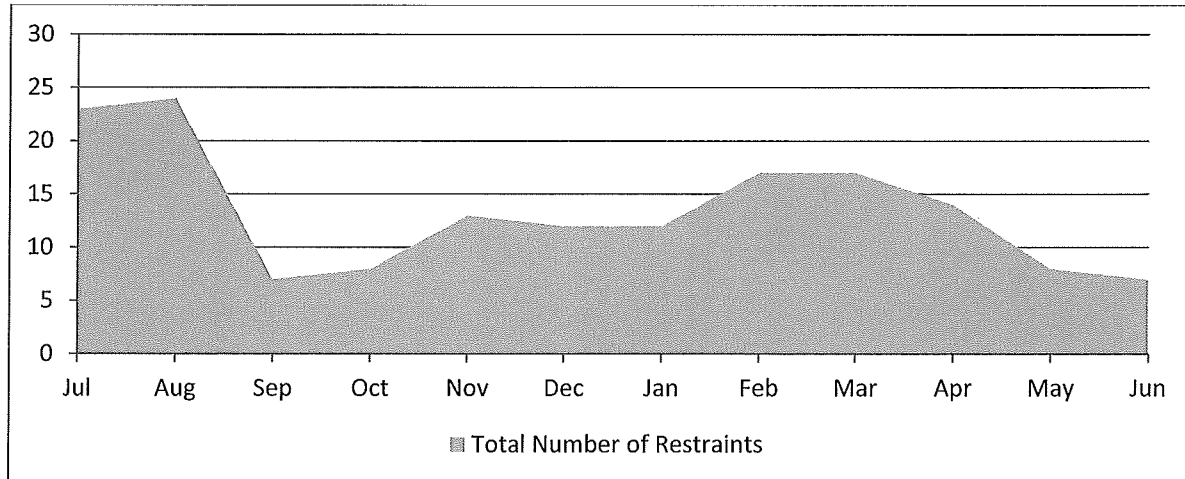
Denials of the Rights reports are completed when the person's right has been denied restricted or there is intent to do so.



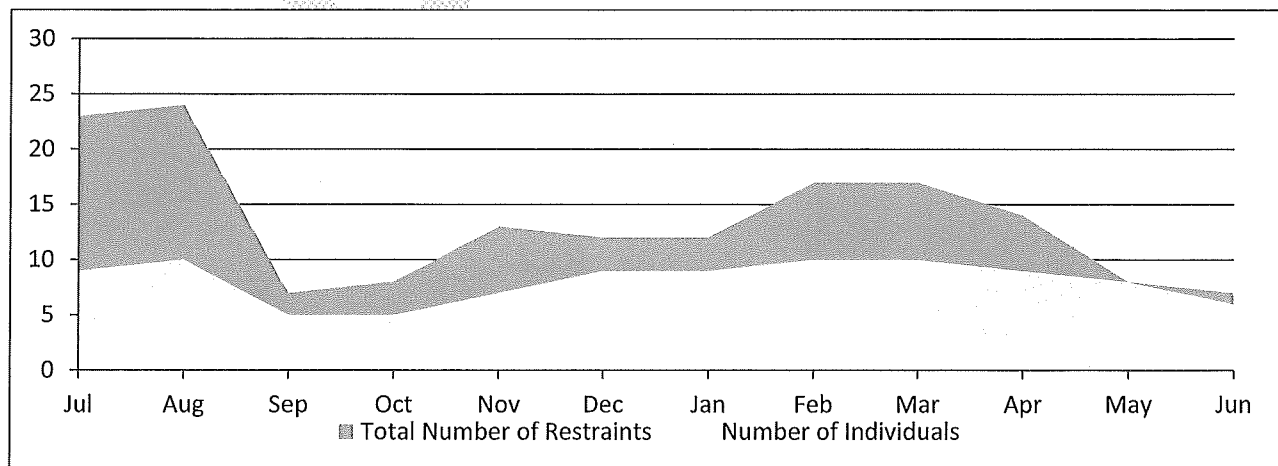
**Nevada Aging & Disability Services Division Developmental Services**  
**Restraint & Denial and Denial of Rights Report**  
**Friday, November 18, 2016**

**Table 6 & 7: DRC Intensive Care Facility (ICF) Restraints**

DRC ICF - Restraints													
Month	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total
Total Number of Restraints	23	24	7	8	13	12	12	17	17	14	8	7	162
Individuals with Multiple Events	6	6	1	2	3	3	3	2	5	4	0	1	36
≤ 2 minutes	3	6	3	0	4	4	0	6	7	1	2	2	38
2 to 10 minutes	4	10	0	5	3	3	7	2	4	6	3	2	49
≥ 10 minutes	16	8	4	3	6	5	5	9	6	7	3	3	75



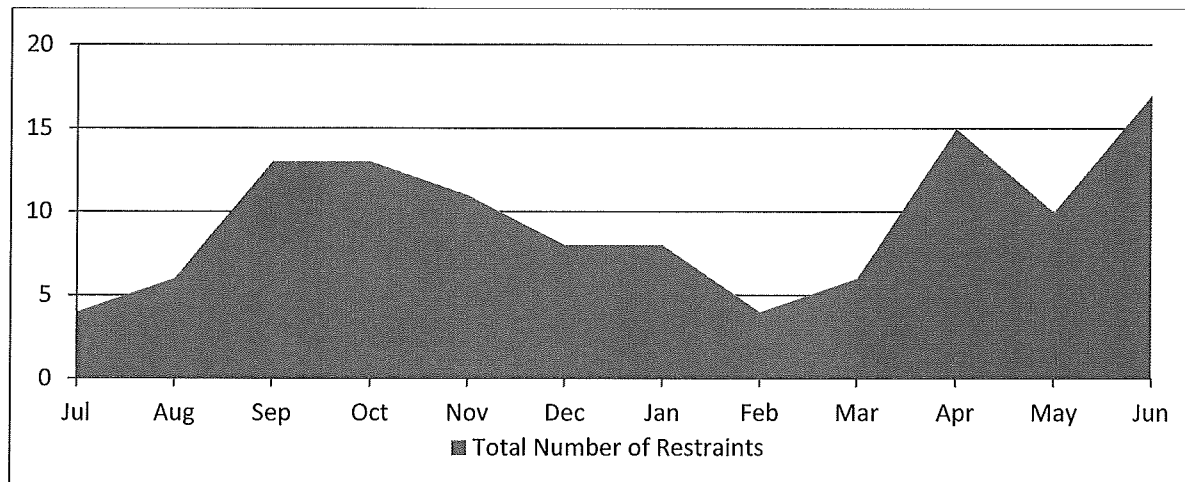
DRC ICF - Restraints													
Month	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total
Number of Individuals	9	10	5	5	7	9	9	10	10	9	8	6	97
Total Number of Restraints	23	24	7	8	13	12	12	17	17	14	8	7	162
Positive Behavioral Support Plan in Place at Time of Event	18	20	2	4	11	12	11	17	17	14	8	7	141
Debriefing/Review required by individual support team	4	8	3	5	9	4	1	1	6	7	5	3	56
Events with Individuals Injuries (Due to the Restraint)	1	0	0	0	0	0	1	0	1	0	0	0	3
Events with Staff Injuries	6	6	0	0	1	1	1	4	2	1	2	2	26



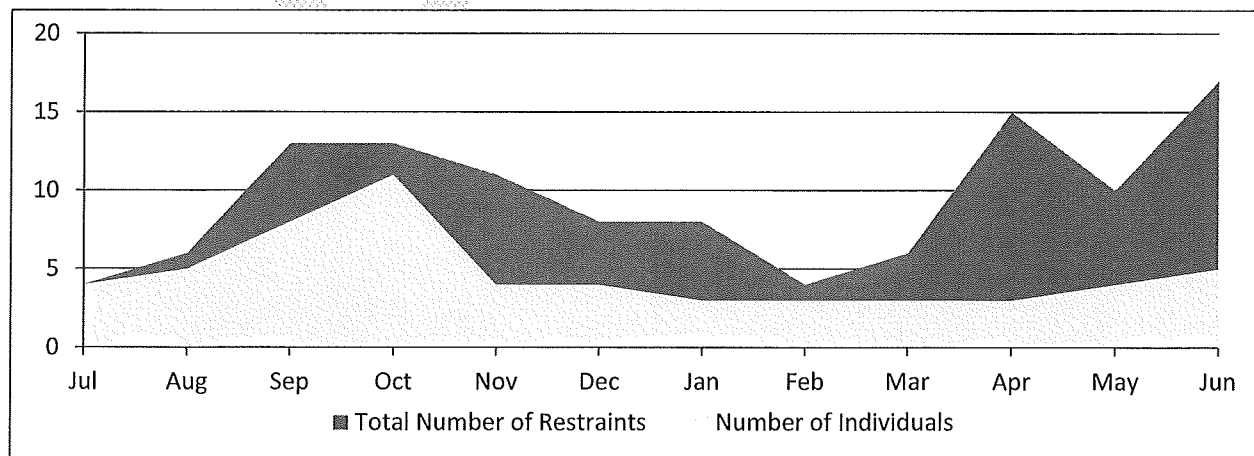
Nevada Aging & Disability Services Division Developmental Services  
 Restraint & Denial and Denial of Rights Report  
 Friday, November 18, 2016

**Table 8, 9 & 10 Rural Regional Center (RRC) Restraints & Denial of Rights**

RRC - Restraints													
Month	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total
Total Number of Restraints	4	6	13	13	11	8	8	4	6	15	10	17	115
Individuals with Multiple Events	0	1	2	1	4	2	2	1	2	2	3	4	24
≤ 2 minutes	4	5	9	8	3	5	3	2	5	6	6	9	65
2 to 10 minutes	0	1	1	3	7	2	4	0	1	5	1	4	29
≥ 10 minutes	0	0	3	2	1	1	1	2	0	4	3	4	21



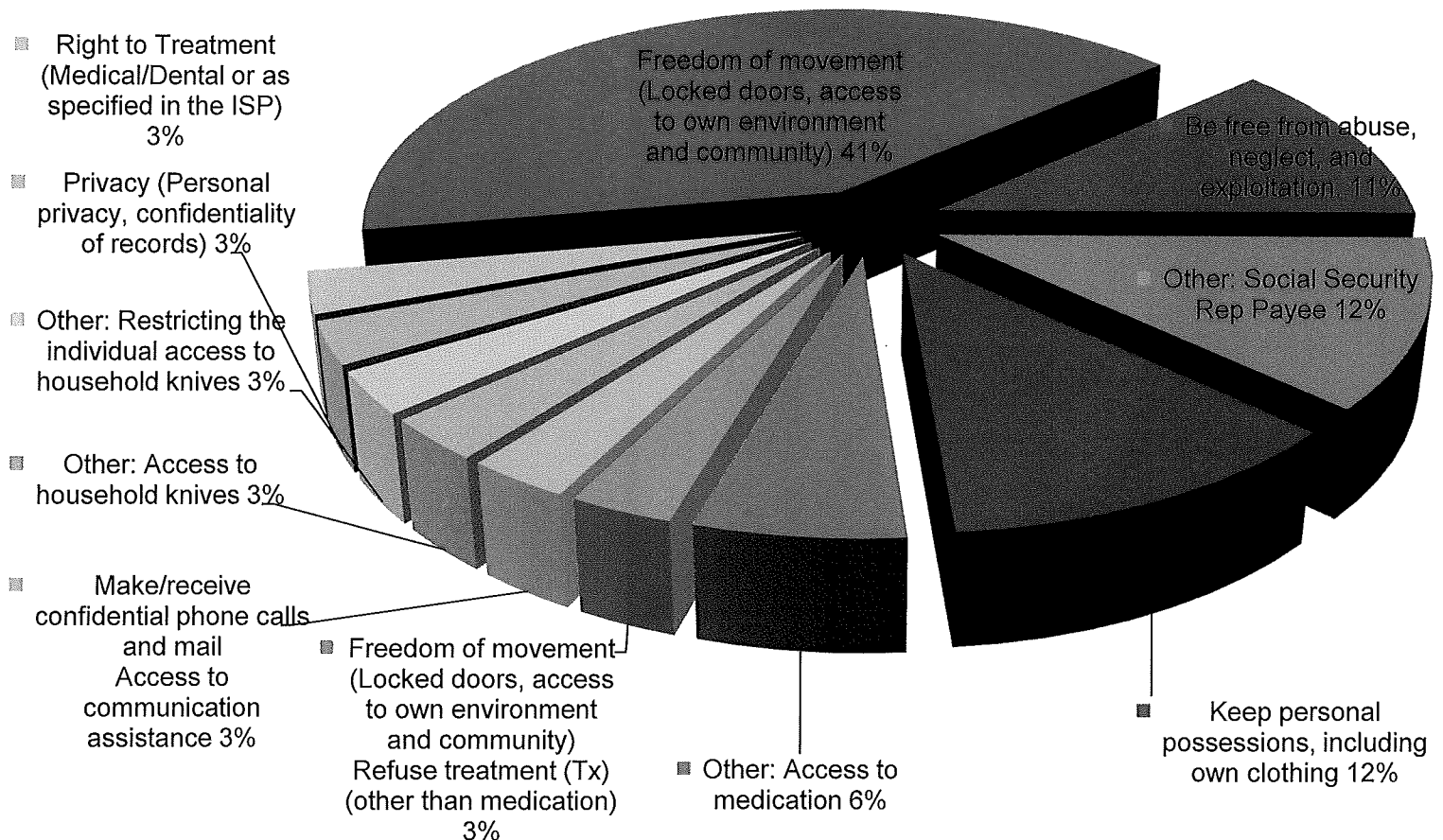
RRC - Restraints													
Month	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total
Number of Individuals	4	5	8	11	4	4	3	3	3	3	4	5	57
Total Number of Restraints	4	6	13	13	11	8	8	4	6	15	10	17	115
Positive Behavioral Support Plan in Place at Time of Event	4	5	11	10	10	8	8	4	6	15	10	17	108
Debriefing/Review required by individual support team	0	1	0	2	0	0	1	0	0	0	0	0	4
Events with Individuals Injuries (Due to the Restraint)	0	0	0	0	0	0	0	0	0	0	0	0	0
Events with Staff Injuries	0	0	0	0	0	0	0	0	2	2	1	0	5



**Nevada Aging & Disability Services Division Developmental Services**  
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<b>RRC - Denial of Rights</b>	
Freedom of movement (Locked doors, access to own environment and community)	<b>14</b>
Be free from abuse, neglect, and exploitation.	<b>4</b>
Other: Social Security Rep Payee	<b>4</b>
Keep personal possessions, including own clothing	<b>4</b>
Other: Access to medication	<b>2</b>
Freedom of movement (Locked doors, access to own environment and community)	<b>1</b>
Refuse treatment (Tx) (other than medication)	<b>1</b>
Make/receive confidential phone calls and mail	<b>1</b>
Access to communication assistance	<b>1</b>
Other: Access to household knives	<b>1</b>
Other: Restricting the individual access to household knives	<b>1</b>
Privacy (Personal privacy, confidentiality of records)	<b>1</b>
Right to Treatment (Medical/Dental or as specified in the ISP)	<b>1</b>
<b>TOTAL</b>	<b>34</b>

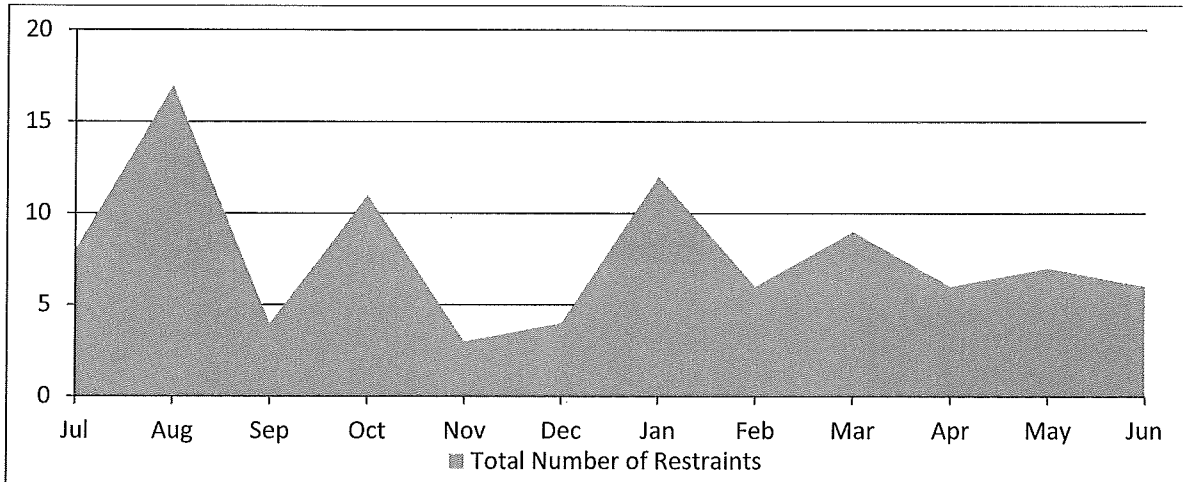
Denials of the Rights reports are completed when the person's right has been denied restricted or there is intent to do so.



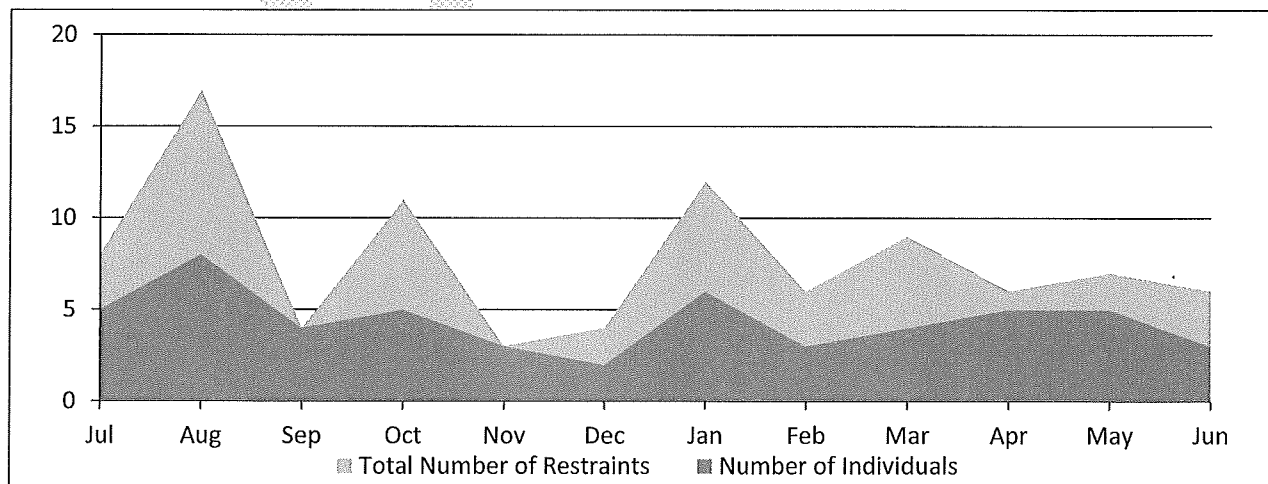
Nevada Aging & Disability Services Division Developmental Services  
 Restraint & Denial and Denial of Rights Report  
 Friday, November 18, 2016

**Table 11, 12 & 13: Sierra Regional Center (SRC) Restraints & Denial of Rights**

SRC - Restraints													
Month	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total
Total Number of Restraints	8	17	4	11	3	4	12	6	9	6	7	6	93
Individuals with Multiple Events	3	4	0	2	0	2	1	1	2	1	2	1	19
≤ 2 minutes	0	7	2	3	1	2	3	3	5	4	3	4	37
2 to 10 minutes	3	5	1	5	1	1	5	2	4	1	1	2	31
≥ 10 minutes	5	5	1	3	1	1	4	1	0	1	3	0	25



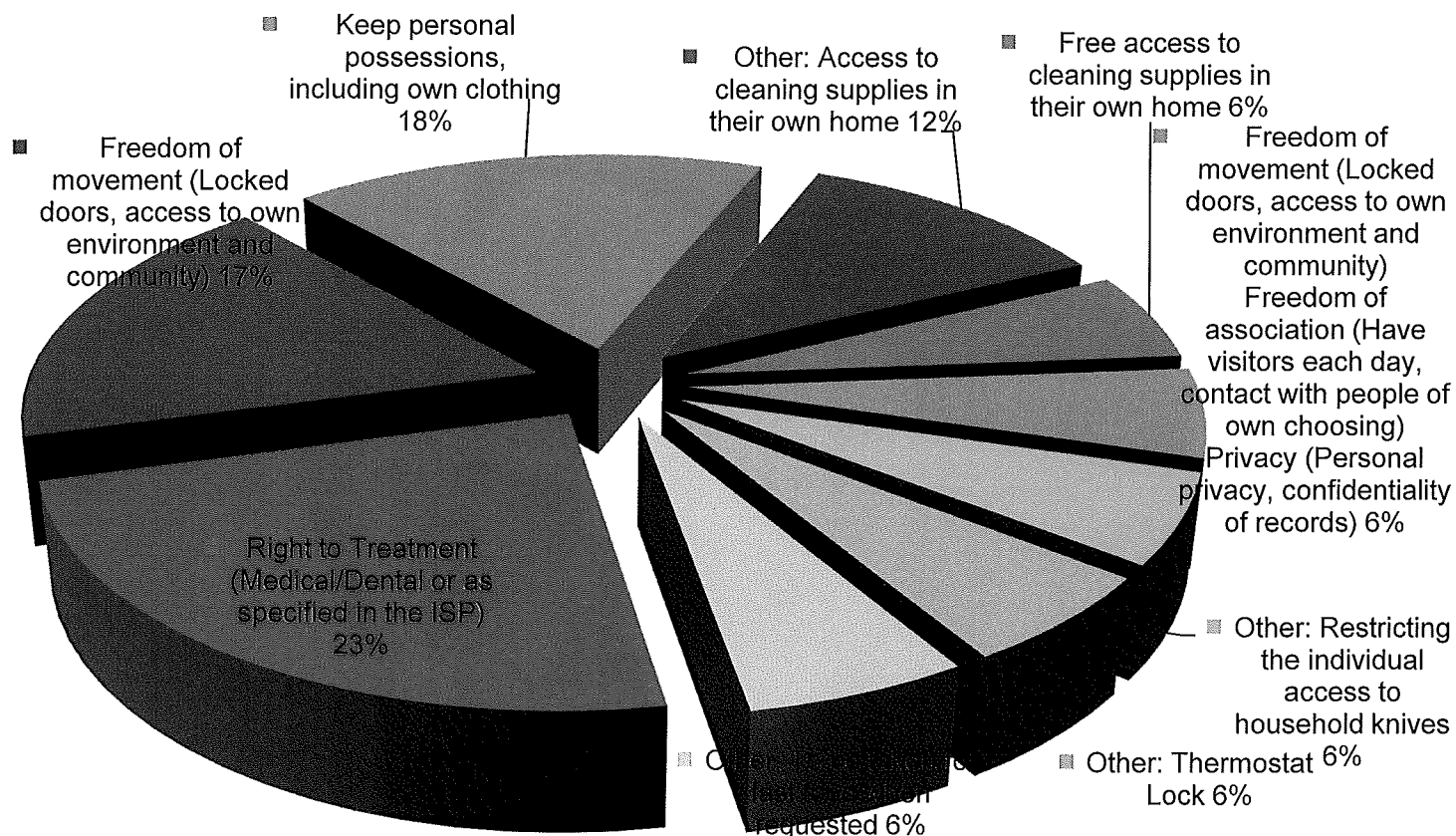
SRC - Restraints													
Month	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total
Number of Individuals	5	8	4	5	3	2	6	3	4	5	5	3	53
Total Number of Restraints	8	17	4	11	3	4	12	6	9	6	7	6	93
Positive Behavioral Support Plan in Place at Time of Event	8	15	3	7	3	4	11	6	8	6	6	6	83
Debriefing/Review required by individual support team	1	2	2	2	0	0	6	5	3	0	0	2	23
Events with Individuals Injuries (Due to the Restraint)	1	0	0	0	0	0	0	0	0	0	0	0	1
Events with Staff Injuries	0	0	0	0	0	0	2	1	1	2	1	0	7



**Nevada Aging & Disability Services Division Developmental Services**  
**Restraint & Denial and Denial of Rights Report**  
**Friday, November 18, 2016**

SRC - Denial of Rights	
Right to Treatment (Medical/Dental or as specified in the ISP)	4
Freedom of movement (Locked doors, access to own environment and community)	3
Keep personal possessions, including own clothing	3
Other: Access to cleaning supplies in their own home	2
Free access to cleaning supplies in their own home	1
Freedom of movement (Locked doors, access to own environment and community)	1
Freedom of association (Have visitors each day, contact with people of own choosing)	
Privacy (Personal privacy, confidentiality of records)	
Other: Restricting the individual access to household knives	1
Other: Thermostat Lock	1
Other: To be taken for fast food when requested	1
<b>TOTAL</b>	<b>34</b>

Denials of the Rights reports are completed when the person's right has been denied restricted or there is intent to do so.





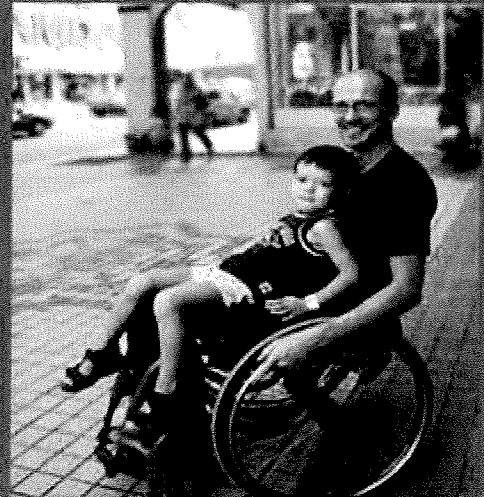
# Aging and Disability Services Division

## Lifespan Services

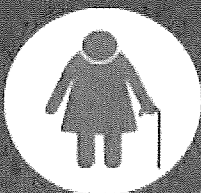
Since 2011, Aging and Disability Services Division has undergone tremendous change, unifying Developmental Disability Services, Early Childhood Intervention, Aging, and Physical Disability Services, creating a true lifespan services division, serving over 24,000 Nevadans each month.

## Our Accomplishments

1. Statewide roll-out and training of Person-Centered Framework to over 500 human services professionals.
2. Systematic changes to maximize Medicaid, bringing in more than \$10 million a year in revenue.
3. Early Childhood Intervention was awarded "Meets Standards" from the US Office of Special Education for the first time in Nevada and maintained a zero waitlist.
4. Widespread children's services provider training on Social Emotional Learning.
5. Expanded role of Long-Term Care Ombudsman to people of all ages in facility settings.
6. Expanded access to services for children with Autistic Spectrum Disorder, with over 40% of ATAP's workforce trained as certified RBTs.
7. Creation and implementation of a Statewide Interpreter Registry for individuals who are deaf and hard of hearing.
8. Created a Statewide Independent Living Plan for community integration.
9. Nevada Elder Protective Services developed best practices for the nation to follow.
10. Consolidation of Medicaid Waivers allowing more access for our most vulnerable populations.
11. SB 307 implementation keeping our most behaviorally complex children home in Nevada and not sent out of state.



## Our Core Values:



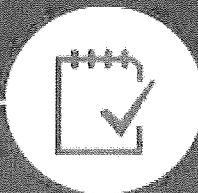
#1

Person  
Centered



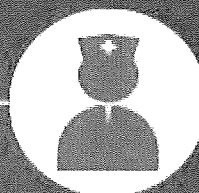
#2

Outcome  
Based



#3

Evidence Based  
Practices



#4

Workforce  
Development



#5

Sustainable  
Funding